Approved, SCAO OSM CODE: RDS

STATE OF MICHIGAN PROBATE COURT COUNTY OF	PERSONAL	TRIBUTIVE SHARE _ PROPERTY  _ PARTIAL	FILE NO.	
Estate of				
I received from the personal represen	tative the following: (des	cribe property received)		
Date		Signature		
		Name (type or print)		
Attorney name (type or print)  Address	Bar no.			
City, state, zip	Telephone no.			

Do not write below this line - For court use only